Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

2001P14844US

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			22		(Gold)		ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ľ	BASIC FEE	355.00	OR		710.00
TOTAL CHARGEABLE CLAIMS			22 minus 20=		· 2		Ì	X\$ 9=		OR	X\$18=	36
INDEPENDENT CLAIMS			5 minus 3 =		2		ı	X40=		OR	X80=	160
MU	TIPLE DEPEN	DENT CLAIM PI	RESENT				ľ	+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ero, ente	"0" in column 2		l	TOTAL		OR	TOTAL	906
CLAIMS AS AMENDED - PART								10		• • •	OTHER	
	O.	(Column 1)	(Colum			(Column 3)		SMALL	ENTITY	OR	SMALL	1
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+135=		OR	+270=	
								TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)		ADDIT. FEE		2	ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						.	405		1	.070	
								+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	_			_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=		OR	X\$18=	}
	Independent	*	Minus	***		=		X40=			X80=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDE			IT CLAIM]			OR		 	
						-t		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
**	"If the "Highest No The "Highest No	umber Previously I mber Previously P	Paid For" IN Ti aid For" (Total	HIS SPACI or Indeper	E is less th adent) is th	an 3, enter "3." e highest numb			propriate bo	x in c	olumn 1.	